Dear Colleagues:

As we near the end of summer our hot weather has returned - probably symbolic of the temperature we expect to find on Capital Hill when our Illinois contingency meets there during our Legislative Conference; PLEASE join us!

The Chapter is very busy with upcoming events. We have our CCA Symposium coming up November 2, 2013, and our FIT/Early Careers members program on October 3, 2013. We are targeting early career members this year. If you have completed your fellowship within the past 5 years and have not received a letter from us please contact Nancy Mueller, our Chapter Executive, at 630-528-4250. We want to make sure you are invited to our event on October 3, 2013.

As much as I have loved my tenure as your Governor it is time to begin considering my replacement! We are in the process of nominating a governor-elect for 2014, so if you would like a challenging and fun filled experience please contact me.

On another note, CMS has announced yet another new measure for cardiology. As we begin to see the impact of moving from Volume to Value, I think this is just one of the many measurements they will be introducing. In the IPPS FY 2014 Final Rule, CMS has added an AMI payment measure to the Inpatient Quality Reporting (IQR) program. CMS is planning on publicly reporting this measure on Hospital Compare. While reporting this measure is still being debated, we know the purpose of all these measures is to increase transparency. They are looking at both the cost and payment related to the provision of care to patients with a diagnosis of AMI from admission to 30 days post admission. For more information click here to see the August 13 CMS presentation slides.

I look forward to seeing you at our upcoming events - especially at the Leg conference!

Marc Shelton, MD
IL ACC Governor

Important News

PACEMAKER COVERAGE FINALIZED

The Centers for Medicare and Medicaid Services (CMS) has finalized its proposal to...
eliminate the distinction in coverage criteria between single- and dual-chamber devices. Either therapy will be covered for "documented symptomatic bradycardia" due to sinus node dysfunction, second degree atrioventricular block, and/or third degree atrioventricular block. A number of other indications will be non-covered. Medicare Administrative Contractors continue to hold the authority to determine coverage for other indications not addressed in the national coverage determination. Your ACC collaborated with the Heart Rhythm Society to request coverage updates and then to recommend revisions to the coverage CMS initially proposed. After initially proposing noncoverage, CMS will permit local contractors to determine coverage for prophylactic pacemaker use following myocardial infarction and hypersensitive carotid sinus syndrome. Thorough documentation of the need for dual-chamber pacemakers continues to be required. The policy is effective as of publication on Aug. 13.

ACC ANALYSIS OF THE PROPOSED 2014 MEDICARE PHYSICIAN FEE SCHEDULE AND HOPPS RULES

The Centers for Medicare and Medicaid Services (CMS) on July 8 released both the proposed 2014 Medicare Physician Fee Schedule and the proposed 2014 Hospital Outpatient Prospective Payment System (HOPPS). Since then, ACC Advocacy staff have carefully reviewed both rules and have developed the following detailed summaries highlighting those provisions that will have the greatest impact on cardiology.

- Proposed 2014 Medicare Physician Fee Schedule Summary
- Proposed 2014 HOPPS Summary

Staff members are preparing detailed comments that will be submitted in late August as part of the public comment period. The final rules are expected in late October. For questions or additional information, contact Brian Whitman at bwhitman@acc.org.

FINAL 2014 INPATIENT HOSPITAL RULE RELEASED

The Centers for Medicare and Medicaid Services (CMS) has released the final rule covering inpatient hospital services for the 2014 fiscal year, which starts on October 1, 2013. Items of note for cardiology include the addition of performance measures for stroke mortality and readmission and the removal of the percentage of patients receiving door-to-balloon time for percutaneous coronary intervention of less than 90 minutes as a performance measure. Overall, hospital payments will increase by 0.7 percent, reflecting an increase based on the hospital market basket measure of inflation but reduced by other factors. There is also a new measure looking at the cost of an MI for a Medicare patient from the point of their MI through 30 days. Click here to see the August 13 CMS National Provider Call slide presentation. Other highlights of the rule are available here.

SGR BILL ADVANCES

The House Energy and Commerce Committee recently voted 51-0 to approve a bipartisan
bill that repeals the Sustainable Growth Rate (SGR), provides a period of stable payment updates, and moves towards a payment system that rewards physicians for providing high quality care. The ACC offered suggestions for improvement to the bill in a letter sent to the Committee recently and will continue to offer guidance to key Committee members and staff as the legislation moves forward. The House Ways and Means Committee and the Senate Finance Committee are also in the process of developing frameworks for repealing the flawed formula. Get weekly updates related to the SGR and other advocacy news in the ACC Advocate.

**BOG CHAIR TALKS PAYMENT REVOLUTION IN NEW CSWN PIECE**

The newest issue of *CardioSource World News* features a piece by ACC BOG Chair David May, MD, FACC on the adaptive problem of payment reform - and calls for what he deems a payment revolution. "These are difficult, nuanced, culturally-charged problems that require painful frankness and a different type of leadership. They must be addressed if meaningful, sustainable progress is to be achieved." he says. Read May's column and more in the newest issue on CardioSource.org.

**ARE YOU READY FOR THE TRANSITION FROM WPS TO NGS?**

See comparison documents on testing between WPS and NGS.

NGS Echo and Stress Echo Policy Highlights
NGS Nuclear and Stress Testing Policy Highlights
NGS Non-Invasive Vascular Testing

**CMS WANTS YOUR SATISFACTION INPUT**

The Centers for Medicare and Medicaid Services (CMS) has created a tool that allows physicians to register their satisfaction levels with Medicare claims administration by signing up for their Medicare Satisfaction Indicator (MSI). Each year, CMS will randomly select its MSI administration sample from a list of providers who register to become a participant. The contractors and CMS use the results to improve the level of service offered to all Medicare fee-for-service providers. Physicians interested in registering can do so by completing a one-page form available here.

**HOSPITALS IN NCDR'S PCI REGISTRY REPORT PCI READMISSION RATES**

Beginning July 18, over 300 hospitals participating in the NCDR ®CathPCI Registry® are reporting their 30-day all-cause risk-standardized readmission rates following percutaneous coronary intervention (PCI) for the first time. By publicly reporting their
results on the Centers for Medicare and Medicaid Services' (CMS) Hospital Compare website, hospitals are helping patients understand the quality of cardiovascular care being provided in their communities. Read more on CardioSource.org. Patient-focused information on the measure is available at CardioSmart.org/myhospital.

DEFINE NEW COLLABORATIVE GUIDELINE MODEL

At the invitation of the National Heart, Lung, and Blood Institute (NHLBI), The American Heart Association (AHA) and the American College of Cardiology (ACC) are officially assuming the joint governance, management and public distribution of five clinical practice guidelines focused on cardiovascular prevention, according to an editorial statement published in both the Journal of the American College of Cardiology and Circulation. The guidelines will provide recommendations on hyperlipidemia, hypertension, cardiovascular risk assessment, cardiovascular lifestyle interventions and obesity. Read more on CardioSource.org.

ARE YOU PART OF THE EARLY EHR MAJORITY

If you’ve already adopted an electronic health record (EHR) system and participated or attempted to participate in the federal EHR Incentive Program, your ACC wants to hear from you. Share your story! The ACC will select some of those stories and the lessons learned to share with your colleagues as we rapidly approach the penalty phase of the EHR program. Tales of both successes and failures are encouraged.

NEW AUC FOR PERIPHERAL VASCULAR ULTRASOUND AND PHYSIOLOGICAL TESTING

The Appropriate Use Criteria (AUC) for Peripheral Vascular Ultrasound and Physiological Testing released by the ACC and developed in collaboration with 10 other leading professional societies, aims to help clinicians optimize the appropriate use of peripheral vascular ultrasound and physiological testing when caring for patients with known or suspected venous disease. Also included are first-time recommendations for when and how to use these tests to plan for or evaluate dialysis access placement. Read more.

NEW COMMUNITY ON AFIB MANAGEMENT HITS CARDIOSOURCE

The ACC in July launched the new Anticoagulation Management Community to help cardiovascular professionals explore the benefits and limitations of anticoagulants across a broad range of disease states. Features include relevant news articles, case challenges, hot topics, basics of anticoagulation, interactive discussions, a question of the month and clinical resources. It is also a critical component of the ACC’s Anticoagulation Initiative, which launched earlier this year. Hear from the community’s editor-in-chief on the ACC in Touch Blog and explore additional CardioSource Clinical Communities.
Upcoming Events

MEET FACE-TO-FACE WITH LAWMAKERS AT ACC'S LEGISLATIVE CONFERENCE

In less than two months, cardiovascular professionals from across the country will gather in Washington, DC, for ACC's 2013 Legislative Conference. With SGR repeal finally making some progress and Affordable Care Act implementation in full swing, health care is rapidly changing. After exploring hot button issues in cardiology, hundreds of attendees will meet directly with their congressional leaders to share how decisions made on Capitol Hill are impacting cardiology. See what else is in store and register.

FALL FELLOWS-IN-TRAINING/EARLY CAREER MEMBERS PROGRAM: PREPARING FOR YOUR FUTURE IN CARDIOLOGY

Thursday, October 3, 2013
Gleacher Center
450 North Cityfront Plaza Drive | Chicago, Illinois 60611

Visit the Event Home Page for additional information or to register.

SIXTH ANNUAL CARDIAC CARE ASSOCIATE SYMPOSIUM

Saturday, November 2, 2013
Lindner Conference Center
610 East Butterfield Road | Lombard, Illinois 60148

Watch the CCA 2013 Event Home Page for additional information.

2ND ANNUAL SPORTS CARDIOLOGY SUMMIT

October 4-5, 2013
Intercontinental Chicago O'Hare

Course Directors: Richard J. Kovacs, MD, FACC and Christine E. Lawless, MD, FACC

Learn More

CV SUMMIT HEADS TO VEGAS IN JANUARY 2014
The *Cardiovascular Summit: Solutions for Thriving in a Time of Change* course will be held January 16 - 18, 2014 at the Aria Casino and Resort Hotel in Las Vegas, Nevada. Staff and member volunteers are in the process of developing content for the meeting. Registration and lodging information will be available on CardioSource.org in the coming weeks.

Contact Jackie Massey at jmassey@acc.org if you have any questions.

If you have any questions or comments regarding the information provided in this newsletter, please email us at ilacc@ilacc.org